

Temp. TRUST water (Donation)
PROGRESS SET - APPLICATION FOR CHANGE TRANSFER

NAME: City of Olympia
Rich Hoey
PO Box 1967
Olympia wa 98507

WRIA 11

APP. NO.	PERMIT NO.	CERT. NO. 4436	CERT. OF CHANGE NO(S)
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COUNTY Thurston

WRATS No. ~~CS-5-10-108~~
CS2-SWK 4436

PURPOSE OF APPLICATION: Donation to Trust

Date Application received: 7/10/08 Date fee received: Amount:
Statement of additional exam. fee: \$ Sent: Rec'd:
Returned for completion or correction: Received:

PUBLICATION: Newspaper:
OK'd by: Date Notice Sent
Date Affidavit received: Time expires:
Checked by: Date:
Protests: by:
by:
by:

FIELD EXAMINATION REQUIRED: YES () NO () ~~expired~~
Examination made: By: ~~10/1/10~~

Date OK'd for CHANGE/TRANSFER: by:
*Statement of Fee Sent: Fee Received:

Date CHANGE ROE ISSUED: No.

*Cert. Of Change ONLY

Application or request for copy received:	Date Fee received:	Amount:
Date approved & mailed to Board for processing:	Approved:	By:
Affidavit of Publication received:	Reviewed by:	
Draft Record of Decision Received:	Final R.O.D. received:	
Modified Record of Decision mailed:	Date accepted/rejected:	
45 day response period ends:		